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### FACSIMILE COVER SHEET

**TO:** Examiner Ortiz – United States Patent and Trademark Office

**CLIENT NAME/NUMBER:** 53325

**TELEPHONE:** 703-308-4446

**FAX NO:** 703-872-9306

**FROM:** Christopher F. Regan, Esq.

**DATE:** November 3, 2003

**NUMBER OF PAGES (INCLUDING COVER SHEET):** 3

**COMMENTS/INSTRUCTIONS:**

Please see attached Response to Restriction Requirement in reply to the Examiner's Restriction Requirement of October 22, 2003.

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In re Patent Application of: )  
MAGNI ET AL. ) Examiner: A. ORTIZ NOV 03 2003  
)  
Serial No. 10/036,335 ) Art Unit: 1732  
)  
Filing Date: DECEMBER 26, 2001 ) Attorney Docket No. 53325  
)  
For: MANUFACTURING METHOD OF AN ) Telefacsimile No. 703-872-9306  
ELECTRONIC DEVICE PACKAGE )  
)

RESPONSE TO REQUIREMENT FOR RESTRICTION

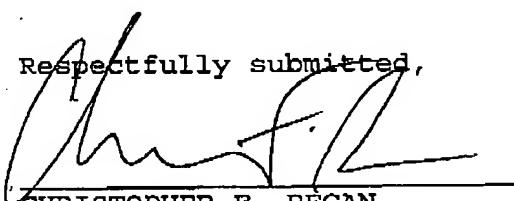
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the restriction requirement of October 22, 2003 Applicant hereby elects Group I, Claims 8-18. It is respectfully requested that the Examiner use his discretion under 35 U.S.C. §121 and withdraw the restriction requirement since search and examination of the entire application can be made without serious burden.

If any extension and/or fee is required, authorization is given to charge Deposit Account No. 01-0484.

Respectfully submitted,

  
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NO. 450 P. 3

In re Patent Application of:  
**MAGNI ET AL.**  
Serial No. 10/036,335  
Confirmation No. 3308  
Filed: DECEMBER 26, 2001

CERTIFICATE OF FACSIMILE TRANSMISSION

I HEREBY CERTIFY that the foregoing correspondence has been forwarded via facsimile number 703-872-9306 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 this 3rd day of November, 2003.

Dawn F. Kimball